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IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No. 17-23732-GLT
David W. Wetzel	:	
Penny Lynn Wetzel	:	Chapter 7
Debtor	:	
	:	
David W. Wetzel	:	Doc. No. ____
Penny Lynn Wetzel	:	
	:	Related to Document No. __
Movants	:	
v.	:	
	:	
No Respondent	:	

### AMENDMENT COVER SHEET

Amendment(s) to the following petition, list(s), schedule(s), or statement(s) are transmitted herewith:

\_\_\_\_\_ Voluntary Petition - *Specify reason for amendment:*

Official Form 6 Schedules (Itemization of Changes Must Be Specified)

\_\_\_\_\_ Summary of Schedules

\_\_\_\_\_ Schedule A - Real Property

\_\_\_\_\_ Schedule B - Personal Property

\_\_\_\_\_ Schedule C - Property Claimed as Exempt

\_\_\_\_\_ Schedule D - Creditors holding Secured Claims

Check one:

\_\_\_\_\_ Creditor(s) added

\_\_\_\_\_ NO creditor(s) added

\_\_\_\_\_ Creditor(s) deleted

\_\_\_\_\_ Schedule E - Creditors Holding Unsecured Priority Claims

Check one:

\_\_\_\_\_ Creditor(s) added

\_\_\_\_\_ NO creditor(s) added

\_\_\_\_\_ Creditor(s) deleted

\_\_\_\_\_ Schedule F - Creditors Holding Unsecured Nonpriority Claims

Check one:

\_\_\_\_\_ Creditor(s) added

\_\_\_\_\_ NO creditor(s) added

\_\_\_\_\_ Creditor(s) deleted

\_\_\_\_\_ Schedule G - Executory Contracts and Unexpired Leases

Check one:

\_\_\_\_\_ Creditor(s) added

\_\_\_\_\_ NO creditor(s) added

\_\_\_\_\_ Creditor(s) deleted

\_\_\_\_\_ Schedule H - Codebtors

**X** Schedule I - Current Income of Individual Debtor(s)

**X** Schedule J - Current Expenditures of Individual Debtor(s)

\_\_\_\_\_ Statement of Financial Affairs

\_\_\_\_\_ Chapter 7 Individual Debtor's Statement of Intention

\_\_\_\_\_ Chapter 11 List of Equity Security Holders

\_\_\_\_\_ Chapter 11 List of Creditors Holding 20 Largest Unsecured Claims

\_\_\_\_\_ Disclosure of Compensation of Attorney for Debtor

\_\_\_\_\_ Other: \_\_\_\_\_

**NOTICE OF AMENDMENT(S) TO AFFECTED PARTIES**

Pursuant to Fed.R.Bankr.P. 1009(a) and Local Bankruptcy Rule 1009-1, I certify that notice of the filing of the amendment(s) checked above has been given this date to the U.S. Trustee, the trustee in this case, and to entities affected by the amendment as follows:

Served by electronic service to:

Pamela J. Wilson, Chapter 7 Trustee      pwilson@epiqtrustee.com  
United States Trustee                      Ustpregion03.pi.ecf@usdoj.gov

Date: July 16, 2018

/s/ Jeffrey J. Sikirica  
Attorney for Debtor(s)

Jeffrey J. Sikirica  
(Typed Name)

121 Northbrook Drive, Gibsonia, PA 15044  
(Address)

(724) 625-2566  
(Phone No.)

PA ID No. 36745  
List Bar I.D. and State of Admission

Note: An amended matrix of creditors added by the amendment must be submitted on disk with the amendment. Attorneys filing electronically on the Case Management/Electronic Case Filing System may add creditors to the case electronically.

**Fill in this information to identify your case:**

Debtor 1 David W Wetzel  
First Name Middle Name Last Name

Debtor 2 Penny Lynn Wetzel  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Western District of Pennsylvania

Case number 17-23732-GLT  
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

# Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1:** Describe Employment

**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

**Employment status**

- ☒ Employed  
☐ Not employed

- ☐ Employed  
☒ Not employed

**Occupation**

truck driver

**Employer's name**

Stallion Oilfield Construction LLC

**Employer's address**

950 Corbindale Road

Number Street

Suite 300

Houston

City

TX

State

77024

ZIP Code

**How long employed there?**

since 1/18

Number Street

City

State

ZIP Code

since 1/18

**Part 2:** Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

**2. List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 3,631.26

\$ \_\_\_\_\_

**3. Estimate and list monthly overtime pay.**

3. + \$ 1,275.75

+ \$ \_\_\_\_\_

**4. Calculate gross income.** Add line 2 + line 3.

4. \$ 4,907.01

\$ \_\_\_\_\_

Debtor 1

David W Wetzel

First Name

Middle Name

Last Name

Case number (if known) 17-23732-GLT

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here..... → 4.	\$ 4,907.01	\$
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 865.68	\$
5b. Mandatory contributions for retirement plans	5b. \$	\$
5c. Voluntary contributions for retirement plans	5c. \$	\$
5d. Required repayments of retirement fund loans	5d. \$	\$
5e. Insurance	5e. \$	\$
5f. Domestic support obligations	5f. \$	\$
5g. Union dues	5g. \$	\$
5h. Other deductions. Specify: <u>Medical</u>	5h. + \$ 224.77	+ \$
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$	\$
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 3,816.56	\$
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$	\$
8b. Interest and dividends	8b. \$	\$
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$	\$
8d. Unemployment compensation	8d. \$	\$
8e. Social Security	8e. \$	\$ 1,085.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$	\$
8g. Pension or retirement income	8g. \$	\$
8h. Other monthly income. Specify: <u>SSI Son</u>	8h. + \$ 50.00	+ \$ 542.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 50.00	\$ 1,627.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 3,866.56 +	\$ 1,627.00 = \$ 5,493.56
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____		
		11. + \$
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies		12. \$ 5,493.56
		<b>Combined monthly income</b>
13. Do you expect an increase or decrease within the year after you file this form?		
<input type="checkbox"/> No.		
<input checked="" type="checkbox"/> Yes. Explain: <u>Social Security to end December 2018</u>		

Fill in this information to identify your case:

Debtor 1 David W. Wetzel  
First Name Middle Name Last Name

Debtor 2 Penny Lynn Wetzel  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Western District of Pennsylvania

Case number 17-23732-GLT  
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☐ No. Go to line 2.
- ☒ Yes. Does Debtor 2 live in a separate household?
- ☒ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
<input type="checkbox"/> No		
<input checked="" type="checkbox"/> Yes. Fill out this information for each dependent.....		
son	22	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
son	17	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ 1,006.58

If not included in line 4:

4a. Real estate taxes 4a. \$ 236.50

4b. Property, homeowner's, or renter's insurance 4b. \$ 20.00

4c. Home maintenance, repair, and upkeep expenses 4c. \$ 290.00

4d. Homeowner's association or condominium dues 4d. \$

Debtor 1 **David W. Wetzel**  
First Name Middle Name Last Name

Case number (if known) **17-23732-GLT**

	Your expenses
5. <b>Additional mortgage payments for your residence</b> , such as home equity loans	5. \$ _____
6. <b>Utilities:</b>	
6a. Electricity, heat, natural gas	6a. \$ <u>400.00</u>
6b. Water, sewer, garbage collection	6b. \$ <u>173.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>625.00</u>
6d. Other. Specify: _____	6d. \$ _____
7. <b>Food and housekeeping supplies</b>	7. \$ <u>900.00</u>
8. <b>Childcare and children's education costs</b>	8. \$ <u>100.00</u>
9. <b>Clothing, laundry, and dry cleaning</b>	9. \$ _____
10. <b>Personal care products and services</b>	10. \$ <u>50.00</u>
11. <b>Medical and dental expenses</b>	11. \$ _____
12. <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>300.00</u>
13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$ <u>100.00</u>
14. <b>Charitable contributions and religious donations</b>	14. \$ _____
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ _____
15b. Health insurance <u>Additional for youngest son.</u>	15b. \$ <u>60.00</u>
15c. Vehicle insurance	15c. \$ <u>283.00</u>
15d. Other insurance. Specify: _____	15d. \$ _____
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ _____
17. <b>Installment or lease payments:</b>	
17a. Car payments for Vehicle 1 <u>2012 Chevy Truck</u>	17a. \$ <u>615.63</u>
17b. Car payments for Vehicle 2	17b. \$ _____
17c. Other. Specify: _____	17c. \$ _____
17d. Other. Specify: _____	17d. \$ _____
18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).</b>	18. \$ _____
19. <b>Other payments you make to support others who do not live with you.</b> Specify: _____	19. \$ _____
20. <b>Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: Your Income</i>.</b>	
20a. Mortgages on other property	20a. \$ _____
20b. Real estate taxes	20b. \$ _____
20c. Property, homeowner's, or renter's insurance	20c. \$ _____
20d. Maintenance, repair, and upkeep expenses	20d. \$ _____
20e. Homeowner's association or condominium dues	20e. \$ _____

Debtor 1

David W. Wetzel

First Name

Middle Name

Last Name

Case number (if known) 17-23732-GLT

21. Other. Specify: See below.

21. +\$ 276.15

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$ 5,435.86

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ 5,435.86

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ 5,493.56

23b. Copy your monthly expenses from line 22c above.

23b. - \$ 5,435.86

23c. Subtract your monthly expenses from your monthly income.  
The result is your *monthly net income*.

23c. \$ 57.70

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☒ Yes.

Explain here: Debtors have \$110,000.00 in IRS tax claims and \$4,250.00 in state tax claims for which some type of payment arrangements will need to be made in the future.

21. Other:	RE Taxes 784 Findlay St	5.98
	RE Taxes 207 Rex Road	170.17
	Medical deductibles/office visits	100.00